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David Rankine Bar#5099 12 W. Taylor St. Reno, Nv 89509 (775) 329-6400

U.S. BANKRUFTCY COURT PATRICIA GRAY, CLERK

Attorney for Shawnda Terrell

	UNITED STAT	res bankrup	TCY COURT
IN RE:	DISTRICT	OF NEVADA,	AT RENO
SHAWNDA TERRELL		Case No. Chapter	06-50638
Debtor		CHapter	,
	/		
SHAWNDA TERRELL		Adv.	
Plaintiff /D	ebtor	<del></del>	Y COMPLAINT Date: N/A
v.			

Defendants / Creditors

ACS EDUCATION SERVICES, INC and

SALLIE MAE, INC.

Comes now Shawnda Terrell, Plaintiff herein, through counsel, the Law Office of David Rankine, and for her complaint alleges as follows:

1) This Adversary Proceeding arises out of Plaintiffs, Shawnda

Terrell's Chapter Seven case 06-50638.

- 2) The court has jurisdiction over this matter pursuant to 28 USC §1334, 11 USC §§ 523. This matter is a core proceeding pursuant to 28 USC §157.
- 3) Sallie Mae Inc. and ACS Education Services, Inc. are creditors in this proceeding. Each holds the right to collect for educational loans made to Shawnda Terrill. A non exclusive list of the educational loans is attached hereto as ex A.
- 4) Shawnda Terrill is permanently disabled. Her sole source of income is a social security disability check in the amount of \$1065 monthly.
- 5) That repayment of the student loans held by the defendants would cause plaintiff an undue hardship.
- 7) That the debt to each defendant should be discharged in her chapter 7 proceeding pursuant to 11 USC §523(a)(8).

WHEREFORE Plaintiff prays for relief as follows.

- 1) For a determination that any liability of Plaintiff to the Defendants for all education loans is discharged in her chapter seven proceeding.
- 2) For an award of costs and fees for this adversary proceeding.
- 3) For such other relief as the court may deem just and proper.

Dated this 25th day of October, 2006.

David Rankine

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BOTTOWAY'S NAME TERRELL SHAWNDA R		Social Security Number 566911080  Social Security Number				
Spouse's Name						
ease print. Er	nter spouse's information only if you completed Section B.)					
	Education Loan Indebtedness — Loans You Wa					
the Loan Cod	tions before completing this section. List all education loans you wan des listed in the instructions. If you need to list additional loans, use th Meted. ONLY LIST LOANS THAT YOU WANT TO CONSOLIDATE IN THIS	ne Additional Loan	including loans currently held by the Listing Sheet included in this pack	ne lender that will be rage. Include your s	consolidating your loans. pouse's loans only if Section	
Loan Code e Instructions)	21. Loan Holder Name and Mailing Address	22. B=Borrower S=Spouse J=Joint	23. Loan Account Number	24. Interest Rate	25. Payoff Amount	
STFS	SALLIE MAE TRUST - LSC/FL 1002 ARTHUR DRIVE LYNN HAVEN, FL	В	566-91~1080-1~01	7.14	\$2,662.93	
STF3	SALLIE MAE TRUST - LSC/FL 1002 ARTHUR DRIVE LYNN HAVEN, FL	В	566~91-1080-1-02	7.14	\$4,395.83	
STFS	SALLIE MAE TRUST - LSC/FL 1002 ARTHUR DRIVE LYNN HAVEN, FL	В	566-91-1080~1-03	7.14	\$1,331.96	
STF3	SALLIE MAE TRUST - LSC/FL 1002 ARTHUR DRIVE LYNN HAVEN, FL	В	566-91-1080-1-04	7.14	\$2,135.17	
STF3	BOA ST. BKNG CA9-169-04-01 - 801871	В	566911080	4.7	\$906.00	
STFS	BOA ST. BKNG CA9-169-04-01 - 801871	В	566911080	4.7	\$2,624.00	
STF3	NELLIE MAE FNBC AS TRUSTEE - 830308	В	5669110 <b>80</b>	4.7	\$1,030.00	
STFS	NELLIE MAE FNBC AS TRUSTEE - 830308	В	566911080	4.7	\$1,312.00	
		/	/			
			<del> </del>			



Page 1 of 1

Any correspondence other than payments should be sent to the address listed on the back of this statement.

07/23/06

ACCOUNT	NFORMA:	TION (This state)	ment may not incli	ude all accounts)			Activ	ity Through:	
ACCOUNT NUMBER	LOAN TYPE	PRINCIPAL BALANCE OUTSTANDING	INTEREST RATE	LAST PAID AMOUNT/DATE	DAYS DELINQUENT	PAST DUE	CURRENT DUE	LATE CHARGE	TOTAL DUE
XXX-XX-1080-1	* FSL	2,382.15	7.140	0.00 00/00/	⁄00 <del>9</del>	50.00	50.00	0.00	100.00
·									1
		RMATION IS INCLUDE		κ		TOTAL	DUE BY:	NON	100.00
IMPC	RTANT M	IESSAGE - PLEAS	SE READ						

Our records show that your last payment has not been received.

If you have already made your payment, thank you.

If you have not made your payment, please send the past due amount and the current due amount shown above immediately. Please mail your payment with the bottom portion of this bill in the enclosed envelope.

If you are experiencing difficulty in making payment(s), please refer to the back of this form for payment options or contact us at 1-800-835-4611 for additional assistance.

In accordance with the terms of your loan(s), your variable interest rate has changed as indicated above which may effect your monthly payment amount.

2%Edvantage Countdown: You need to make only 48 more on-time payments to qualify for a 2 percentage point interest rate reduction on your eligible loan(s).

A copy of this notice has been sent to any co-makers and/or co-signers of this loan. To pay the above loan in full, please pay \$2,408.64 by 08/14/06

BIL2

DETACH HERE AND RETURN LOWER PORTION WITH YOUR PAYMENT
Address or Phone Number change?
Check box and write your new address

011800

BIL2



P.O. BOX 7051 UTICA, NY 13504-7051

and/or phone number on back.

Account Number M3344A	XXX-XX-1080-1	
Payment Due Date NOW	Please Pay This Amount 100.00	Make Check Payable to
ACS		7

 Include the coupon and make sure the address appears properly through the return envelope window. TERRELL, SHAWNDA R

4959 TALBOT LN APT 81 RENO, NV 89509-6512

P.O. BOX 9001560 LOUISVILLE, KY 40290-1560 Mallhandlahamaldahallahadlahadlah

* Do not send cash	
* Write account number	<b>:</b>

Amount Paid

on your check BL032A

## FORM 104 (10/06)

1

ADVERSARY PROCEEDING COVER SH. (Instructions on Reverse)	ADVERSARY PROCEEDING NUMBER (Court Use Only)			
PLAINTIFFS SHAWNDA TERRELL	DEFENDANTS SALIE MAE ACS EDUCATION SERVICE			
ATTORNEYS (Firm Name, Address, and Telephone No.)  DAVID RANKINE 12 TAYLORST  RE10 NU 509	ATTORNEYS (If Known)			
PARTY (Check One Box Only) Debtor U.S. Trustee/Bankruptcy Admin Creditor Other Trustee	PARTY (Check One Box Only)  Debtor U.S. Trustee/Bankruptcy Admin  Creditor Other  Trustee			
CAUSE OF ACTION (WRITE A BRIEF STATEMENT OF CAU	SE OF ACTION, INCLUDING ALL U.S. STATUTES INVOLVED)			
NATURE (Number up to five (5) boxes starting with lead cause of action a	OF SUIT  J. first alternative causé as 2, second alternative cause as 3, etc.)			
FRBP 7001(1) - Recovery of Money/Property  11-Recovery of money/property - §542 turnover of property  12-Recovery of money/property - §547 preference  13-Recovery of money/property - §548 fraudulent transfer  14-Recovery of money/property - other  FRBP 7001(2) - Validity, Priority or Extent of Lien  21-Validity, priority or extent of lien or other interest in property	FRBP 7001(6) — Dischargeability (continued)  61-Dischargeability - §523(a)(5), domestic support  68-Dischargeability - §523(a)(6), willful and malicious injury  63-Dischargeability - §523(a)(8), student loan  64-Dischargeability - §523(a)(15), divorce or separation obligation (other than domestic support)  65-Dischargeability - other			
FRBP 7001(3) – Approval of Sale of Property  31-Approval of sale of property of estate and of a co-owner - §363(h)	FRBP 7001(7) - Injunctive Relief 71-Injunctive relief - reinstatement of stay 72-Injunctive relief - other			
FRBP 7001(4) - Objection/Revocation of Discharge  41-Objection / revocation of discharge - §727(c),(d),(e)	FRBP 7001(8) Subordination of Claim or Interest  81-Subordination of claim or interest			
FRBP 7001(5) - Revocation of Confirmation  51-Revocation of confirmation	FRBP 7001(9) Declaratory Judgment 91-Declaratory judgment			
FRBP 7001(6) - Dischargeability  66-Dischargeability - §523(a)(1),(14),(14A) priority tax claims  62-Dischargeability - §523(a)(2), false pretenses, false representation, actual fraud  67-Dischargeability - §523(a)(4), fraud as fiduciary, embezzlement, larceny  (continued next column)	FRBP 7001(10) Determination of Removed Action  01-Determination of removed claim or cause  Other  SS-SIPA Case - 15 U.S.C. §§78aaa et.seq.  02-Other (e.g. other actions that would have been brought in state court if unrelated to bankruptcy case)			
☐ Check if this case involves a substantive issue of state law	☐ Check if this is asserted to be a class action under FRCP 23			
☐ Check if a jury trial is demanded in complaint	Demand \$			
Other Relief Sought  DISCHARE STUDENT LOAN				

### FORM 104 (10/06), Page 2

BANK	RUPTCY CASE IN	WHICH THIS ADVERS	ARY F	PROCEEDING ARISES		
NAME OF DEBTOR SHAWNDA TERRELL			, and the second second second second	BANKRUPTCY CASE NO. 638		
DISTRICT IN WHICH CASE IS PENDING  READ  10 10 11			NAME OF JUDGE			
	RELATED	ADVERSARY PROCEE	DING	(IF ANY)		
PLAINTIFF	DEFENDA	IDANT A		ERSARY PROCEEDING NO.		
DISTRICT IN WHICH ADVE	RSARY IS PENDING	DIVISIONAL OFFICE		NAME OF JUDGE		
SIGNATURE OF ATTORNE	Y (OR PLAINTIFF)					
		٠.	•			
DATE	PRINT NA	ME OF ATTORNEY (OR P	LAINTI	FF)		

#### INSTRUCTIONS

The filing of a bankruptcy case creates an "estate" under the jurisdiction of the bankruptcy court which consists of all of the property of the debtor, wherever that property is located. Because the bankruptcy estate is so extensive and the jurisdiction of the court so broad, there may be lawsuits over the property or property rights of the estate. There also may be lawsuits concerning the debtor's discharge. If such a lawsuit is filed in a bankruptcy court, it is called an adversary proceeding.

A party filing an adversary proceeding must also must complete and file Form 104, the Adversary Proceeding Cover Sheet, if it is required by the court. In some courts, the cover sheet is not required when the adversary proceeding is filed electronically through the court's Case Management/Electronic Case Files (CM/ECF) system. (CM/ECF captures the information on Form 104 as part of the filing process.) When completed, the cover sheet summarizes basic information on the adversary proceeding. The clerk of court needs the information to process the adversary proceeding and prepare required statistical reports on court activity.

The cover sheet and the information contained on it do not replace or supplement the filing and service of pleadings or other papers as required by law, the Bankruptcy Rules, or the local rules of court. The cover sheet, which is largely self-explanatory, must be completed by the plaintiff's attorney (or by the plaintiff if the plaintiff is not represented by an attorney). A separate cover sheet must be submitted to the clerk for each complaint filed.

Plaintiffs and Defendants. Give the names of the plaintiffs and the defendants exactly as they appear on the complaint.

Attorneys. Give the names and addresses of the attorneys, if known.

Party. Check the most appropriate box in the first column for the plaintiffs and in the second column for the defendants.

Demand. Enter the dollar amount being demanded in the complaint.

Signature. This cover sheet must be signed by the attorney of record in the box on the second page of the form. If the plaintiff is represented by a law firm, a member of the firm must sign. If the plaintiff is pro se, that is, not represented by an attorney, the plaintiff must sign.